

House Human Services Committee, Charge 2.1, Family First Act RFI Submission

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About NAMI Texas

The National Alliance on Mental Illness of Texas (NAMI Texas) is a 501(c)3 nonprofit organization founded by volunteers in 1984. NAMI Texas is affiliated with the National Alliance on Mental Illness (NAMI) and has 27 local Affiliates throughout Texas. NAMI Texas has nearly 2,000 members made up of individuals living with mental illness, family members, friends, and professionals. Its purpose is to help improve the lives of people affected by mental illness through education, support, and advocacy.

Interim charge

Interim Charge 2.1: Review how Texas is preparing for state and federal budgetary changes that impact the state's health programs, including: 2.1) The Family First Prevention Services Act.

Introduction

The Family First Prevention Services Act has provided Texas with a paradigm-shifting opportunity to reform the Texas child welfare system and produce well-being outcomes for children and families at risk in Texas. This 2018 federal law regulates Title IV federal funding, and Texas is required to revamp its child welfare system to be geared towards keeping families together and providing the specialized services those at risk to avoid CPS system involvement.

Mental health and substance use disorders play a significant, but often underestimated, role in the child welfare system, both for the children who enter the system and the parents or caregivers who risk losing custody. The Family First Prevention Services Act presents Texas with the opportunity to strengthen our treatment systems and improve access to care for families in need.

Texas should ensure that the implementation of the Family First Prevention Services Act includes access to mental health and substance use disorder treatment and support for children and families to reduce the risk of child entry into the foster care system.

Family First Prevention Services Actⁱ

The 2018 federal Family First Prevention Services Act, as part of Bipartisan Budget Act, restructures federal child welfare funding under Title IV-E and Title IV-B of the Social Security Act to require Texas DFPS to improve services and outcomes for children placed in congregate care settings, kinship caregivers and the children they are caring for, parents who struggle with substance abuse, and children who are at imminent risk of entering foster care. This law is intended to incentivize Texas to enhance prevention and early intervention strategies and reduce the number of children who enter the foster care system.

The Family First Prevention Services Act permits Title IV-E reimbursement up to 50% of state spending for certain types of services for fewer than 12 months for parents at risk of child

removal, including mental health and substance use prevention and treatment services provided by a qualified clinician and in-home parent skilled-based programs that include parenting skills training, parent education, and individual and family counseling.

Parental Mental Health and Substance Use Disorder

Treating mental health and substance use disorder must be at the center of prevention strategies. Substance use disorders, which often co-occur with mental health issues, play a major role in child removals in Texas.

- Over two-thirds of child removals in Texas are connected to a parental substance use.ⁱⁱ
- 94% of removal cases in which parental substance use was a factor cited neglectful supervision as a primary reason for child removal, not abuse.ⁱⁱⁱ
- Children under age 6 account for almost two-thirds of removals in parental substance use-involved cases.^{iv}

Expanding access to substance use disorder treatment is critical to reduce child removal. From Texans Care for Children's 2019 report^v:

- Only 5.8% of low-income Texas adults with a substance use disorder are able to receive treatment services through a community-based treatment provider.
- In 2017, there were 13,177 low-income Texas adults and 163 Texas youth on a waitlist for a spot at a community-based substance use treatment provider.
- There are only ten residential treatment providers in Texas that contract with HHSC and allow pregnant women/mothers and their children to stay together during the course of recovery.

The Family First Prevention Services Act has the potential to provide new funding opportunities to address untreated mental health and substance use disorders amongst parents or caregivers, but **there are currently certain populations that face barriers to receiving services under current eligible population definitions.**^{vi}

- Pregnant women with substance use disorder who have not given birth yet
- Mothers with post-partum depression
- Pregnant/parenting youth who have aged out of foster care

The restrictions around how eligible populations will be defined by DFPS means that Texas will be forced to delay intervention until a CPS case has already been or is closer to being opened. **NAMI Texas encourages the development of strategies to expand population eligibility to ensure these individuals living with substance use disorder receive treatment and support when they need help and without punishment for seeking help.**

Mental Health and Child Relinquishment^{vii}

NAMI Texas advocates the mental health and well-being of all Texans and their right to access appropriate mental health services at the right time. For individuals living with severe mental health issues, it can be much more difficult to access the right care without court involvement.

Texas has a wide range of outpatient services, with varying degrees of accessibility, for families who have a child with severe mental health needs. However, families whose children need residential treatment often struggle to pay for the service, receive adequate insurance coverage, or even find a facility that accepts non-CPS children with their unique needs.

Prior to 2014, many Texas families facing this dilemma made the difficult choice to relinquish custody of their child into the foster care system so the child could receive vital mental health treatment. Parents were forced to navigate the judicial system to access care for their child, treated by the system as negligent, and struggled to have appropriate access to their child as a joint managing conservator. During the 83th legislative session, the Department of State Health Services received \$2 million over a biennium create the Children's Mental Health Residential Treatment Center Relinquishment Avoidance Project within DFPS, with funding for up to 10 residential treatment center beds at a time for families whose children need residential treatment services and would not otherwise have CPS involvement.

The Children's Mental Health Residential Treatment Center Relinquishment Avoidance Project has been a critical lifeline for keeping families together, serving 41 individuals between 2017-2019, but the program still needs more capacity to serve all families in need. The program has recently increased to 50 slots for placement, but 117 were waitlisted between 2017-2019 and the average wait time between referral and placement is 77 days.

The Children's Mental Health RTC Relinquishment Avoidance Project and the impacted population is not mentioned in DFPS's current strategic plan for the Family First Prevention Services Act, and they are not considered an eligible population under proposed definitions. This program, located within DFPS, serves an incredibly valuable role in keeping children out of the CPS system and connected with their families, a key goal of the FFPSA.

NAMI Texas recommends:

- **Remove barriers** to FFPSA population eligibility to ensure that this project can receive Title IV-E reimbursement funding.
- **Expand capacity** of Children's Mental Health Residential Treatment Center Relinquishment Avoidance Project.
- **Reduce wait times** families experience for RTC placement within project.
- **Streamline the process** to reduce family interaction with the traditional CPS system while ensuring the project can still access Title IV-E funding.
- **Increase awareness** amongst LMHA and DFPS staff of the unique needs of this population of children and families.

Conclusion

The Family First Prevention Services Act provides Texas with a strong opportunity to address the root causes of CPS system involvement, including lack of access mental health and substance use disorder treatment and support services for both children and their caregivers. To truly develop a child welfare system grounded in prevention, we must fund strong prevention programs that intervene before a family has CPS or criminal justice involvement.

ⁱ Department of Family and Protective Services (Sept. 2020). Family First Prevention Services Act Strategic Plan. Retrieved from

https://www.dfps.state.tx.us/About_DFPS/Reports_and_Presentations/CPS/documents/2020/2020-09-01-Family_First_Prevention_Services_Act_Strategic_Plan.pdf.

ⁱⁱ Price, Four (2018). House Select Committee on Opioids and Substance Abuse House of Representatives Interim Report.

ⁱⁱⁱ Texas Department of Family & Protective Services (2018), Data on Rates By Catchment, Age, Gender, Removal Reasons, and Incarceration.

^{iv} Ibid.

^v Murphy, K. (Apr. 2019). Parental Substance Use in Texas CPS Cases and Opportunities to Keep Families Safely Together. Texans Care for Children. Retrieved from

<https://static1.squarespace.com/static/5728d34462cd94b84dc567ed/t/5cb8b6f9eb39313d24239b9c/1555609342776/pb-txbarfoundation-substance-use.pdf>.

^{vi} Interview with Kate Murphy, Texans Care for Children, September 2020.

^{vii} D. McClung and M. Lopez (2019). The Residential Treatment Initiative to Prevent Parental Relinquishment: 2019 Evaluation Report. Texas Institute of Excellence in Mental Health.